

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/444,359
Filing Date	November 18, 1999
First Named Inventor	Donald E. Gillespie et al.
Group Art Unit	2749
Examiner Name	
Attorney Docket Number	020366-067400US

Total Number of Pages in This Submission 3

**ENCLOSURES (check all that apply)**

- |   |   |  |
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| <input type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Response<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><br><input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input checked="" type="checkbox"/> Power of Attorney and Statement Under 37 C.F.R. §3.73(b)<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Return Postcard<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below) |
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Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm and Individual name	Townsend and Townsend and Crew LLP Chad S. Hilyard, Reg. No. 40,647
Signature	<i>Chad S. Hilyard</i>
Date	1/9/2002

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 1-9-02

Typed or printed name	Theresa L. VanDerhoof		
Signature	<i>Theresa L. VanDerhoof</i>	Date	1-9-02

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